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PTO/SER30 (09-06)
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Request	Application Number	10/017,640						
for	Filing Date	December 14	December 14, 2006					
Continued Examination (RCE)  Transmittal	First Named Inventor	William R. Ma	William R. Matz					
Address to:		3629	· · · · · · · · · · · · · · · · · · ·					
Mail Stop RCE	Art Unit	Jonathan P. (	Duellette					
Commissioner for Patents P.O. Box 1450	Examiner Name							
Alexandria, VA 22313-1450	Attorney Docket Number							
This is a Request for Continued Examination (RCE) under 37 CFR 1.114 of the above-identified application.  Request for Continued Examination (RCE) practice under 37 CFR 1.114 does not apply to any utility or plant application filed prior to June 8, 1995, or to any design application. See Instruction Sheet for RCEs (not to be submitted to the USPTO) on page 2.								
Submission required under 37 CFR 1.114 Note: If the RCE is proper, any previously filed unentered amendments and amendments enclosed with the RCE will be entered in the order in which they were filed unless applicant instructs otherwise. If applicant does not wish to have any previously filed unentered amendment(s) entered, applicant must request non-entry of such amendment(s).  Previously submitted. If a final Office action is outstanding, any amendments filed after the final Office action may be								
considered as a submission even if this box is								
. Consider the arguments in the Applear b	Consider the arguments in the Appeal Billet of Reply Billet previously filed on							
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b. Ly I Enclosed  I. Amendment/Reply	b. L Enclosed  L Amendment/Reply iii Information Disclosure Statement (IDS)							
ii. Affidavit(s)/ Declaration(s)								
2. Miscellaneous	· · ·							
Suspension of action on the above-identified	application is requested under	37 CFR 1.103(c)	for a					
	a period of months. (Period of suspension shall not exceed 3 months; Fee under 37 CFR 1.17(i) required)  b Other							
3. Fees  The RCE fee under 37 CFR 1.17(e) is required by 37 CFR 1.114 when the RCE is filed.  The Director is hereby authorized to charge the following fees, any underpayment of fees, or credit any overpayments, to Deposit Account No								
L RCE fee required under 37 CFR 1.17(e)	)							
II. Extension of time fee (37 CFR 1.138 and 1								
iii. Other								
b. Check in the amount of \$	endose	d	16 TOOK L PAGES					
c. Payment by credit card (Form PTO-2038 enclose								
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTC-2038.								
	ANT, ATTORNEY, OR AGENT		,					
Signature School Williams (Print/Type) Bambi Falvre Walters		late legistration No.	9/22/06 45.197					
	F MAILING OR TRANSMISSIO		1-41.01					
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Mail Stop RCE, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 or facelimile transmitted to the U.S. Patent and Trademark Office on the date shown below.								
Signature By Dr. Willte	1 720 5	ta   0/1-	Inc.					
Name (Print/Type) DAM BI FALV RE WALTEN Date 9/22/DG  This collection of information is required by 37 CFR 1.114. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO								
to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will very depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tradement Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop RCE, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.  If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.								

Signature

FEE TRANSMITTAL

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	Application Number	110	/017,640		Y
	Filing Date		cember 14, 2001		•
	First Named Inventor		Illam R. Matz		
	Examiner Name		nathan P. Ouellette		
	Art Unit	36	29		
	Attorney Docket No.	BL	S01342		
	Deposit Aca	count Na	ermex		-
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ΕC	ALCULATION				
SE	ARCH FEES		<b>EXAMINATION F</b>	EES	
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			· Fee (	<b>\$</b> )	Fee Paid (\$)
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					. 001 000 (4)

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				Filing Date	Decembe	r 14, 2001				
for FY 2005  Applicant claims small entity status. See 37 CFR 1.27				First Named Inv		n R. Matz				
				Examiner Name		P. Queflette				
				Art Unit	3629					
				Attorney Docket		2				
TOTAL	MOUNT OF PAY	MENT	\$910.00	1			<del></del>			
METHOD OF PAYMENT (check all that apply)  ☐ Check ☑ Credit Card ☐ Money Order ☐ None ☐ Other										
Deposit Account Deposit Account No. 19-2167 Deposit Account Name:										
The Director is authorized to: (check all that apply)										
☑ Charge fee(s) i	•				☐ Charge fe	e(s) indicated below, exce	ept for the filing fee			
	lditional fee(s) or und	erpayments of fee(s	under 37 CFR 1.1	16 and 1.17		• •				
				CALCULATION			-			
1. BASIC FILING	, SEARCH, AND EX	AMMATION FEES			<del>, , , , , , , , , , , , , , , , , , , </del>	<del>,</del>				
		NG FEES	S.	ARCH FEES EXAMINATION FEES						
A-diadic- T				Small Entity		Small Entity Fee	Fees Paid (\$)			
Application Type	Fee (\$)	Small Entity Fee (\$)	<u>Fee (\$)</u>	<u>Smau =nou</u> (\$)	/ Fee Fee (\$)	(\$)	recs rau (a)			
Utility	300	150	500	250	200	100				
Design	200	100	100	50	130	65				
-										
Plant	200	100	300	150	160	80	<del></del>			
Reissue	300	150	500	250	600	300				
Provisional	200	100	0	0 .	0	0				
2. EXCESS CLAI	M FEES									
Fee Description						Fee (\$)	Small Enty Fee (\$)			
Each claim over 20	0 (including Reissues	:)			•	50	25			
	claim over 3 (includ	= 1				200	100			
Multiple dependent	•	,				360	180			
Total Claims		Extra Claims	Fee(\$)	Fee Paid (S	<u>S)</u>	Multiple Depende	ent Claims			
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HP=highest number	er of independent cla	ims paid for, if great	er (han 3.							
ndep. Claims		Extra Claims	Fee (\$)	Fee Paid (\$	n					
gidep. Classis	- 3 or HP ≃	Extra Claims	7 (4)	=	4					
HP=highest number		ims paid for, if great	er than 3							
HP=highest number of independent claims paid for, if greater than 3  3. APPLICATION SIZE FEE										
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250.00 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).										
Total Sheets	у юг өнсп ноошолей 50	sneets or traction the Extra Sheets	eui, sez 33 U;5.U.	у ус сив (суд уву и	DER 1.10(a).	Fee (\$)	Fee Paid (\$)			
TOTAL SERVICE	- 10 <b>0</b> =	-our Misses	/50	(rour	ndup) x	=======================================				
4. OTHER FEE(S)			,				Fee Pald (\$)			
Non-English Specification, \$130 fee (no small entity discount)										
Other (e.g., late filing surcharge): 1.17(a)(1) Fee (\$120) & 1.17(e) Fee (\$790) 910.00										
SUBMITTED BY:						Complete (if applicable)				
Name (Print/Type	) Bambi F. Viait	ers	Registration No		45,197	Telephone:	(757) 253–5729			
1			(Attorney/Agent)							